

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000032890

1. Entity Name

COMMERCIAL CONSTRUCTION OF SW FLORIDA, INC.

P99000032890

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 MAY -1 PM 12:56

Principal Place of Business

Mailing Address

~~2610 KATHERINE STREET~~ 6141 Hamilton Drive
FORT MYERS FL ~~33901~~ PO BOX 50279
FORT MYERS FL 33994
Fortmyers FL 33905

07-20-06 90020 049 \$550.00 \$150.00
150.00 from 2000 overpayment applied to 2001 UBR

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0911464

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

6141 Hamilton Drive

City

Fortmyers FL

FL

Zip Code

33905

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME HENRY, MARCEL A
STREET ADDRESS 1492 HARWELL AVE.
CITY-ST-ZIP CROFTON MD 21114

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME CALLOW-CANNONS, SHERRY
STREET ADDRESS 2610 KATHERINE STREET
CITY-ST-ZIP FORT MYERS FL 33901

TITLE D - Vice President, Treasurer ☒ Change ☐ Addition
NAME
STREET ADDRESS 6141 Hamilton Drive
CITY-ST-ZIP Fortmyers FL 33905

TITLE D ☐ Delete
NAME THOMANN, JILL
STREET ADDRESS 2610 KATHERINE STREET
CITY-ST-ZIP FORT MYERS FL 33901

TITLE D - President, Secretary ☒ Change ☐ Addition
NAME
STREET ADDRESS 6141 Hamilton Drive
CITY-ST-ZIP Fortmyers FL 33905

TITLE D ☐ Delete
NAME ENDERBY, SAM
STREET ADDRESS 2610 KATHERINE STREET
CITY-ST-ZIP FORT MYERS FL 33901

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 140 W Hwy 82
CITY-ST-ZIP Gainesville TX 76240

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME D
STREET ADDRESS Marcia Henry
CITY-ST-ZIP 1492 Harwell Ave

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS Crofton MD 21114

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Sherry L Cannons

V.P.

1-11-01

941-693-1223

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

SHERRY L. CANNONS

CR2E034 (10/00)